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## BIB DATA SHEET

CONFIRMATION NO. 2935

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/676,729	10/01/2003 RULE	623	3774	9542.18427-FOR		
<b>APPLICANTS</b> David A. Rahdert, San Francisco, CA; John A. Macoviak, La Jolla, CA; Timothy R. Machold, Moss Beach, CA; Robert T. Chang, Belmont, CA; Rick A. Soss, Burlingame, CA;						
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/429,444 11/26/2002 and claims benefit of 60/429,709 11/26/2002 and claims benefit of 60/429,462 11/26/2002 and is a CIP of 09/666,617 09/20/2000 PAT 6,893,459 and is a CIP of PCT/US02/31376 10/01/2002 which claims benefit of 60/326,590 10/01/2001						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 12/23/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ALVIN J STEWART/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance AS Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 13	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> RYAN KROMHOLZ & MANION, S.C. POST OFFICE BOX 26618 MILWAUKEE, WI 53226 UNITED STATES						
<b>TITLE</b> Devices, systems, and methods for retaining a native heart valve leaflet						
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			